

EASY-KLEEN

PRESSURE SYSTEMS LTD.

MANUFACTURER OF HIGH PRESSURE CLEANING EQUIPMENT

Date of Application: _____

PERSONAL INFORMATION

Name: _____

First

Last

Address: _____

Street

City/Province

Postal Code

Contact Information: (_____) _____ (_____) _____

Home Phone

Cell Phone

Email (Required)

How did you learn about our company? _____

Please check which positions you are interested in applying for:

- Office / Administration Sales / Marketing Metal Fabrication
 Assembly Line Paint Department

Available Start Date: _____ Are you currently employed? _____

Desired Pay Range: _____ (Hourly or Salary)

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position(s).

What are your weaknesses? _____

Are you willing to submit the following ?:

Personality test:	Yes / No
IQ test:	Yes / No
Drug & Alcohol test:	Yes / No

PREVIOUS EMPLOYMENT

Please list your 3 previous employers, and reason for leaving.